Professional Standards Scheme Revocation of Exemption Application



A member of the Society may, on taking up membership or at the latest renewal have obtained an exemption from participation in the QLS Professional Standards Scheme. Such an exemption is effective until the next 30 June. In the course of a practice year, a member with an exemption may wish to participate in the Scheme. For example, if the member changes employment from a law practice that does not participate in the Scheme to one that does. To maintain its Scheme protection, a law practice must have each of its eligible staff also participate in the Scheme. In such a case, a revocation of exemption must be obtained.

Member details	*mandatory fields	Employment details	*mandatory fields
*Title	Mr Mrs Miss Ms Mx Other (Please specify)	iss Ms Mx Other (Please specify) Please complete the following details about your firm or employer. If as with more than one firm or employer, please append additional details.	
		*Firm name/employer	
*First name			
		*Street address	
*Middle name/s			
		*Postal address	
*Surname			
		Postcode	Э
*Date of birth			
		*Work email address	
Gender		Employment status	
Male Female	Not specified		
Decorations, honours (Not includi	ng your academic qualifications eg AO, OBE)		
		Application to remove exemption from particip	ation in the
Residential address		Queensland Law Society Professional Standard	ds Scheme
		I apply to revoke my exemption from participation in th	
	Postcode	Law Society Professional Standards Scheme for the p	
		20 from the date hereof and I provide herewith an a for the current year.	auministration ree
Private telephone number	(Include area code)		
		Electronic Transactions Act	
Mobile telephone number		In accordance with the <i>Electronic Transactions</i> (<i>Queensland</i>) Act 2001, provide notices, such as membership renewals and notices for Council	Elections, to you
		by electronic communication. By completing this application, your conse of contact is taken to be given.	ent to this form
*Private email address			
		Declare and sign	
		I solemnly and sincerely declare that the information and p set forth in this form are complete and accurate in every d	articulars etail.
		Signed	
		Date	

Payment of fees					
Total amount payable (including GST) \$ 190					
	My cheque payable to Queensland Law Society Inc is enclosed				
	Please debit my credit card (Diners Club is not accepted) Visa Mastercard Amex				
Card number					
Expiry date	/	Amount \$			
Cardholder signature					

Privacy statement

WE RESPECT YOUR PRIVACY. This form asks for personal information. Please refer to our **Personal Information Collection Notice** for more details. The notice can be accessed here **qls.com.au/Content-Collections/Policies/Personal-Information-Collection-Notice**. If you have any questions or are unable access it online, please contact us on 1300 367 757.